		According to the calculations required by this statement:
In re	Roosevelt Parks	The applicable commitment period is 3 years.
III IC.	Debtor(s)	☐ The applicable commitment period is 5 years.
	12 22279 I	Disposable income is determined under § 1325(b)(3).
Case 1	Number: 12-32378-L	Disposable income not determined under § 1325(b)(3).
	(If known)	(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedule I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Part I. REPOR	T OF INCOME				
	a. 🗹	Villing status. Check the box that applies and compute Unmarried. Complete only Column A ("Debtor's Married. Complete both Column A ("Debtor's Incomplete both Column A ("Debtor's Incomplete both Column A ("Debtor's Incomp	Income") for Lines 2-10.				
1	six caler before the	res must reflect average monthly income received findar months prior to filing the bankruptcy case, end the filing. If the amount of monthly income varied the six-month total by six, and enter the result on the	ling on the last day of the month luring the six months, you must	1	Column A Debtor's Income	$ \mathbf{S} $	lumn B pouse's ncome
2	Gross v	vages, salary, tips, bonuses, overtime, commission	ns.	\$	2,734.50	\$	N.A.
3	and enter business Do not e	from the operation of a business, profession or for the difference in the appropriate column(s) of Links, profession or farm, enter aggregate numbers and penter a number less than zero. Do not include any on Line b as a deduction in Part IV.	e 3. If you operate more than one provide details on an attachment.				
	a.	Gross receipts	\$ 0.00				
	b.	Ordinary and necessary business expenses	\$ 0.00				
	c.	Business income	Subtract Line b from Line a	\$	0.00	\$	N.A.
	the appr	nd other real property income. Subtract Line b fropriate column(s) of Line 4. Do not enter a numbe the operating expenses entered on Line b as a de	r less than zero. Do not include any duction in Part IV.				
4	a.	Gross receipts	\$ 0.00				
	b.	Ordinary and necessary operating expenses	\$ 0.00				
	c.	Rent and other real property income	Subtract Line b from Line a	\$	0.00	\$	N.A.
5	Interest	t, dividends and royalties.		\$	0.00	\$	N.A.
6	Pension	and retirement income.		\$	0.00	\$	N.A.
7	expense purpose debtor's	es of the debtor or the debtor's dependents, include. Do not include alimony or separate maintenance is spouse. Each regular payment should be reported Column A, do not report that payment in Column 1	ding child support paid for that payments or amounts paid by the in only one column; if a payment is	\$	0.00	\$	N.A.

8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$	\$ 0.00	\$ N.A.
9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.	Ψ	Ţ
	a. \$ 0.00		
	b. \$ 0.00 \$ Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2	\$ 0.00	\$ N.A.
10	through 9 in Column B. Enter the total(s).	\$ 2,734.50	\$ N.A.
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.	\$	2,734.50
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PER	RIOD	
12	Enter the Amount from Line 11.		\$ 2,734.50
13	Marital adjustment. If you are married, but are not filing jointly with your spouse, AND if you calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT pair regular basis for the household expenses of you or your dependents and specify, in the lines below for excluding this income (such as payment of the spouse's tax liability or the spouse's support of other than the debtor or the debtor's dependents) and the amount of income devoted to each purponecessary, list additional adjustments on a separate page. If the conditions for entering this adjust apply, enter zero. a.	e of your id on a w, the basis persons ose. If	
	Total and enter on Line 13.		\$ 0.00
14	Subtract Line 13 from Line 12 and enter the result.		\$ 2,734.50
15	Annualized current monthly income for §1325(b)(4). Multiply the amount from Line 14 by the 12 and enter the result.	e number	\$ 32,814.00
16	Applicable median family income. Enter the median family income for the applicable state and ho size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the court.)	bankruptcy	
	a. Enter debtor's state of residence: b. Enter debtor's household size:	<u> </u>	\$ 39,082.00
17	Application of §1325(b)(4). Check the applicable box and proceed as directed. ✓ The amount on Line 15 is less than the amount on Line 16. Check the box for "The application 3 years" at the top of page 1 of this statement and continue with this statement. The amount on Line 15 is more than the amount on Line 16. Check the box for "The application is 5 years" at the top of page 1 of this statement and continue with this statement.		
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSA	ABLE INCO	ME
18	Enter the Amount from Line11.		\$ 2,734.50

		2004	0	i age o oi						3
19	Marital adjustment. If you are not any income listed in Line 10, Co of the debtor or the debtor's deperincome (such as payment of the sor the debtor's dependents) and the adjustments on a separate page. In a. b.	Column B that was ndents. Specify, in pouse's tax liability e amount of incon	NOT the l y or the ne dev	paid on a regularines below, the best supported to each pur	ar basis for the pasis for except of person except. If necessary the pasis for except of person except. If necessary the pasis for except of the pasis for except	he hous luding t is other cessary,	sehold expent the Column than the de list addition	nses B btor	\$	0.00
20	Current monthly income for §2	1325(h)(3) Subtre	act Li	ne 10 from Line	18 and enter	r the res	eult		<u> </u>	2,734.50
20	Annualized current monthly in								Ф	2,731.30
21	number 12 and enter the result.	100111e 101 §1323()))(3).	Multiply the an	iount iroin i	Line 20	by the		\$ 3	32,814.00
22	Applicable median family inco	me. Enter the am	ount	from Line 16.					\$ 3	39,082.00
	Application of §1325(b)(3). Ch	neck the applicable	box a	and proceed as d	irected.			-		
23	The amount on Line 21 is runder §1325(b)(3)" at the top									rmined
23	The amount on Line 21 is r determined under \$1325(b)(3 complete Parts IV, V or VI.	3)" at the top of pa	amo ge 1 o	ant on Line 22. of this statement	Check the and continu	box for e with l	· "Disposabl Part VII of t	e incon his stat	ne is eme	not nt. Do not
	Part IV. CA	LCULATION	OF	DEDUCTIO	NS FRO	M IN	COME			
	Subpart A: Deduc	tions under Sta	anda	rds of the In	ternal Re	venue	Service (IRS)		
24A	National Standards: food, apparamiscellaneous. Enter in line 24 Expenses for the applicable number the clerk of the bankruptcy court allowed as exemptions on your forwhom you support.	A the "Total" amober of persons. (The applicable is	unt fr iis inf numb	om IRS National ormation is availer of persons is t	l Standards f lable at wwv he number t	for Allo v.usdoj. hat wou	owable Livir .gov/ust/ or uld currently	from y be	\$	N.A.
24B	National Standards: health car of-Pocket Health Care for persons of-Pocket Health Care for persons www.usdoj.gov/ust/ or from the c persons who are under 65 years of years of age or older. (The application that would currently be allowed a additional dependents whom you under 65, and enter the result in L and older, and enter the result in I the result in Line 24B.	s under 65 years of s 65 years of age of lerk of the bankrup f age, and enter in table number of pe s exemptions on y support.) Multiple Line c1. Multiply I	f age, r olde ptcy c Line rsons our fe y line Line a	and in Line a2 the court.) Enter in I b2 the applicable in each age cate deral income taxes a1 by Line b1 to 2 by Line b2 to	he IRS Nation is avail Line b1 the a e number of gory is the range to obtain a total be IRS Nation to a value cobtain a total to a value to a value a value	onal State able at applicable persons aumber as the nutral amount of the	ole number of s who are 65 in that cates imber of any pount for person the for person	Out- of 5 gory 7 sons ns 65		
	Persons under 65 years of age		Pers	ons 65 years of	age or olde	r				
	a1. Allowance per person	N.A.	a2.	Allowance per	person		N.A.			
	b1 Number of persons	N.A.	b2.	Number of pers	sons		N.A.			
	c1. Subtotal	N.A.	c2.	Subtotal			N.A.		\$	N.A.
25A	Local Standards: housing and u Utilities Standards; non-mortgage available at www.usdoj.gov/ust/ o consists of the number that would the number of any additional depo	e expenses for the or from the clerk of l currently be allow	applice f the l ved as	able county and pankruptcy court s exemptions on	family size. The appli	(This i	information amily size	is	\$	N.A.

4

25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, IRS Housing and Utilities Standards; mortgage/rent expense for your coun is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy cour consists of the number that would currently be allowed as exemptions on you the number of any additional dependents whom you support); enter on Lin Monthly Payments for any debts secured by your home, as stated in Line 4 enter the result in Line 25B. Do not enter an amount less than zero.	ty and family size (this information rt) (the applicable family size your federal income tax return, plus e b the total of the Average	
	a. IRS Housing and Utilities Standards; mortgage/rental expense	\$ N.A.	
	b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	§ N.A.	
	c. Net mortgage/rental expense	Subtract Line b from Line a.	\$ N.A.
26	Local Standards: housing and utilities; adjustment. If you contend that and 25B does not accurately compute the allowance to which you are entite. Utilities Standards, enter any additional amount to which you contend you your contention in the space below:	led under the IRS Housing and	\$ N.A.
27A	Local Standards: transportation; vehicle operation/public transportate expense allowance in this category regardless of whether you pay the expense allowance in this category regardless of whether you pay the expense of regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses of are included as a contribution to your household expenses in Line 7. If you checked 0, enter on Line 27A the "Public Transportation" amount for Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operational Standards: Transportation for the applicable number of vehicles in the Statistical Area or Census Region. (These amounts are available at www.uthebankruptcy.court.)	r for which the operating expenses olimits 1 or more. olimits 1 or more. or IRS Local Standards: crating Costs" amount from IRS the applicable Metropolitan	\$ N.A.
27B	Local Standards: transportation; additional public transportation expenses for a vehicle and also use public transportation, and you contend additional deduction for your public transportation expenses, enter on Line amount from the IRS Local Standards: Transportation. (This amount is avairon the clerk of the bankruptcy court.)	that you are entitled to an e 27B the "Public Transportation"	\$ N.A.
28	Local Standards: transportation ownership/lease expense; Vehicle 1. Combined which you claim an ownership/lease expense. (You may not claim an ownership years expense.) I	S Local Standards: Transportation t); enter in Line b the total of the n Line 47; subtract Line b from zero. N.A.	\$ N.A.

5

	Local Standards: transportation ownership/lease expense; Vehicle 2. Co checked the "2 or more" Box in Line 28.	mplete this Line only if you	
29	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line a and enter the result in Line 29. Do not enter an amount less than zeta	enter in Line b the total of the Line 47; subtract Line b from	
	a. IRS Transportation Standards, Ownership Costs	\$ N.A.	
	b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$ N.A.	
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$ N.A.
30	Other Necessary Expenses: taxes. Enter the total average monthly expense all federal, state and local taxes, other than real estate and sales taxes, such a taxes, social security taxes, and Medicare taxes. Do not include real estate	is income taxes, self-employment	\$ N.A.
31	Other Necessary Expenses: involuntary deductions for employment. Endeductions that are required for your employment, such as mandatory retirer and uniform costs. Do not include discretionary amounts, such as voluntary	nent contributions, union dues,	\$ N.A.
32	Other Necessary Expenses: life insurance. Enter total average monthly preterm life insurance for yourself. Do not include premiums for insurance of or for any other form of insurance.		\$ N.A.
33	Other Necessary Expenses: court-ordered payments. Enter the total mort to pay pursuant to the order of a court or administrative agency, such as spot not include payments on past due support obligations included in Line 4	isal or child support payments. Do	\$ N.A.
34	Other Necessary Expenses: education for employment or for a physicall Enter the total monthly amount that you actually expend for education that is for education that is required for a physically or mentally challenged dependeducation providing similar services is available.	s a condition of employment and	\$ N.A.
35	Other Necessary Expenses: childcare. Enter the total average monthly ame childcare—such as baby-sitting, day care, nursery and preschool. Do not incopayments.		\$ N.A.
36	Other Necessary Expenses: health care. Enter the total average monthly a on health care that is required for the health and welfare of yourself or your by insurance or paid by a health savings account, and that is in excess of the not include payments for health insurance or health savings accounts list	dependents, that is not reimbursed amount entered in Line 24B. Do	\$ N.A.
37	Other Necessary Expenses: telecommunication services. Enter the total a actually pay for telecommunications services other than your basic home tel such as pagers, call waiting, caller id, special long distance, or internet service your health and welfare or that of your dependents. Do not include any amount of the services of the services of the services of the services.	ephone and cell phone service – ce—to the extent necessary for	\$ N.A.
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 2	4 through 37.	\$ N.A.
	Subpart B: Additional Living Expense I Note: Do not include any expenses that you have l		

			nsurance, and Health Savings Accept in lines a-c below that are reasonal					
		dependents.	t in fines a-c below that are reasonat	ory neces	sary for your	sen, your spouse, or		
	a.	Health Insurance		\$	N.A.			
20	b.	Disability Insurance		\$	N.A.			
39	c.	Health Savings Accou	int	\$	N.A.			
	Total	and enter on Line 39		•			\$	N.A.
			his total amount, state your actual t	total aver	age monthly	expenditures in the		
	space \$	below: N.A.						
			care of household or family mem					
40	I		continue to pay for the reasonable an		•	* *		
			ed member of your household or me Do not include payments listed in			ite family who is	\$	N.A.
						avnances that you	Ψ	
41			nce. Enter the total average reasonal ety of your family under the Family					
			e nature of these expenses is required				\$	N.A.
			otal average monthly amount, in exc					
42			ies that you actually expend for hon					
		trustee with documentation int claimed is reasonable	on of your actual expenses, and you and necessary.	u must a	emonstrate	tnat the additional	\$	N.A.
			lent children under 18. Enter the to	tal averas	e monthly ex	xpenses that you	Ė	
			7.92* per child, for attendance at a p					
43			en less than 18 years of age. You mu	_	-			
			expenses, and you must explain wl accounted for in the IRS Standard		nount claime	ed is reasonable	\$	N.A.
		<u>·</u>	xpense. Enter the total average mon		unt by which	your food and	1	
			mbined allowances for food and clot					
44			d 5% of those combined allowances					
		. <u>usdoj.gov/ust/</u> or from the int claimed is reasonable	clerk of the bankruptcy court.) You	must der	nonstrate th	at the additional	\$	N.A.
			er the amount reasonably necessary	for you to	n expend eac	h month on		
45			rm of cash or financial instruments					
	26 U.	S.C. § 170(c)(1)-(2). Do n	ot include any amount in excess of	f 15% of	your gross r	nonthly income.	\$	N.A.
46	Total	Additional Expense Dedi	ictions under § 707(b). Enter the to	tal of Lir	es 39 throug	h 45.		
40	1000	Traditional Expense Deal					3	N.A.
	1		Subpart C: Deductions for I					
			aims. For each of your debts that is					
	you o Pavm	own, list the name of creditonent, and check whether the	or, identify the property securing the payment includes taxes and insuran	ce The A	l state the Av verage Mont	erage Monthly thly Payment is the		
			contractually due to each Secured (
			vided by 60. If necessary, list addition	onal entri	es on a separ	ate page. Enter the		
	total (of the Average Monthly Pay	ments on Line 47.					
477		Name of Creditor	Property Securing the Debt	Δ	verage	Does payment		
47		Name of Creditor	Property Securing the Debt		Ionthly	include taxes or		
					ayment	insurance?		
	a.			\$		☐ yes ☐no		
	b.			\$		☐ yes ☐no		
	c.			\$		☐ yes ☐no		
				I .	l: Add Lines		\$	N T 4
				[a, b	and c		φ	N.A.

40	a mo inclu to th inclu	ne payments listed in Line 47, in ordude any sums in default that must be	sary for your support or the suppor amount (the "cure amount") that you ler to maintain possession of the pro- e paid in order to avoid repossession	t of your dependents, you may ou must pay the creditor in addition operty. The cure amount would n or foreclosure. List and total any		
48	such	n amounts in the following chart. If Name of Creditor	Property Securing the Debt	a separate page. 1/60th of the Cure Amount		
	a.			\$		
	b.			•		
	c.			\$		
48				Total: Add Lines a, b and c	\$	N.A.
49	prio Do 1	rity tax, child support and alimony on tinclude current obligations, su	claims, for which you were liable at ach as those set out in Line 33.	by 60, of all priority claims, such as the time of your bankruptcy filing.	\$	N.A.
	Cha resu	pter 13 administrative expenses. lting administrative expense.	Multiply the amount in Line a by the	e amount in Line b, and enter the		
	a.	Projected average monthly Cha	pter 13 plan payment.	\$ N.A.		
50	b.	Current multiplier for your distr schedules issued by the Executi Trustees. (This information is a or from the clerk of the bankrup	ive Office for United States vailable at www.usdoj.gov/ust/	N.A.		
	c.	Average monthly administrative	e expense of Chapter 13 case	Total: Multiply Lines a and b	\$	N.A.
51	Tota	al Deductions for Debt Payment.	Enter the total of Lines 47 through	50.	\$	N.A.
		Sı	ibpart D: Total Deductions from	Income		
52	Tota	Su al of all deductions from income. I			\$	N.A.
52	Tota	d of all deductions from income. I	Enter the total of Lines 38, 46, and		_	N.A.
52		d of all deductions from income. I	Enter the total of Lines 38, 46, and S	51.	_	N.A.
	Tota Sup	of all deductions from income. I	Enter the total of Lines 38, 46, and 3 FION OF DISPOSABLE INC. the amount from Line 20. rerage of any child support payment and reported in Part I, that you received.	COME UNDER § 1325(b)(2) is, foster care payments, or yed in accordance with applicable)	
53	Tota Sup disa nonl Qua	Part V. DETERMINAT al current monthly income. Enter port income. Enter the monthly av bility payments for a dependent chil cankruptcy law, to the extent reason	Enter the total of Lines 38, 46, and 3. FION OF DISPOSABLE IN the amount from Line 20. For age of any child support payment and, reported in Part I, that you receivably necessary to be expended for ster the monthly total of (a) all amount and part I, as specified in § 5410.	come under § 1325(b)(2) ts, foster care payments, or yed in accordance with applicable such child. Ints withheld by your employer from	\$	N.A.
53	Tota Sup disa nonl Qua wag repa	Part V. DETERMINAT al current monthly income. Enter port income. Enter the monthly av bility payments for a dependent chil bankruptcy law, to the extent reason alified retirement deductions. Enter es as contributions for qualified retirement	Enter the total of Lines 38, 46, and 30 the amount from Line 20. The rerage of any child support payment and, reported in Part I, that you receivably necessary to be expended for ster the monthly total of (a) all amount rement plans, as specified in § 5416 ans, as specified in § 362(b)(19).	come under § 1325(b)(2) its, foster care payments, or yed in accordance with applicable such child. ints withheld by your employer from (b)(7) and (b) all required	\$	N.A.
53 54 55	Tota Sup disa nonl Qua wag repa Tota Ded which a-c l Line prov	Part V. DETERMINAT al current monthly income. Enter port income. Enter the monthly availability payments for a dependent chiloankruptcy law, to the extent reason alified retirement deductions. Enter es as contributions for qualified retirement playments of loans from retirement playments of all deductions allowed under uction for special circumstances.	Enter the total of Lines 38, 46, and 3. TION OF DISPOSABLE IN the amount from Line 20. The rerage of any child support payment and the reported in Part I, that you receive the monthly total of (a) all amount and the monthly total of (a) all amount and answer specified in § 5410 ans, as specified in § 362(b)(19). § 707(b)(2). Enter the amount from the special circumstances the describe the special circumstances that it is a specified in § 5410 answer special circumstances that it is a special circumstance t	ts, foster care payments, or yed in accordance with applicable such child. Ints withheld by your employer from (b)(7) and (b) all required In Line 52. That justify additional expenses for and the resulting expenses in lines expenses and enter the total in eses expenses and you must	\$ \$	N.A. N.A.
53 54 55 56	Tota Sup disa nonl Qua wag repa Tota Ded which a-c l Line prov	Part V. DETERMINAT al current monthly income. Enter port income. Enter the monthly av bility payments for a dependent chil cankruptcy law, to the extent reason diffied retirement deductions. Enter es as contributions for qualified retire yments of loans from retirement plantal of all deductions allowed under uction for special circumstances. ch there is no reasonable alternative below. If necessary, list additional enter 257. You must provide your case wide a detailed explanation of the	Enter the total of Lines 38, 46, and 25 TION OF DISPOSABLE INC the amount from Line 20. The reage of any child support payment and the reported in Part I, that you receive the about the monthly total of (a) all amount are ment plans, as specified in § 5410 ans, as specified in § 362(b)(19). § 707(b)(2). Enter the amount from the special circumstances that the special circumstances that the special circumstances that make special circumsta	ts, foster care payments, or yed in accordance with applicable such child. Ints withheld by your employer from (b)(7) and (b) all required In Line 52. That justify additional expenses for and the resulting expenses in lines expenses and enter the total in eses expenses and you must	\$ \$	N.A. N.A.
53 54 55	Tota Sup disa nonl Qua wag repa Tota Ded which a-c l Line prov	Part V. DETERMINAT al current monthly income. Enter port income. Enter the monthly aviolating payments for a dependent chiliponkruptcy law, to the extent reason diffied retirement deductions. Enter es as contributions for qualified retirements of loans from retirement plantal of all deductions allowed under suction for special circumstances. In there is no reasonable alternative pelow. If necessary, list additional experiences are detailed explanation of the sonable.	Enter the total of Lines 38, 46, and 25 TION OF DISPOSABLE INC the amount from Line 20. The reage of any child support payment and the reported in Part I, that you receive the about the monthly total of (a) all amount are ment plans, as specified in § 5410 ans, as specified in § 362(b)(19). § 707(b)(2). Enter the amount from the special circumstances that the special circumstances that the special circumstances that make special circumsta	ts, foster care payments, or yed in accordance with applicable such child. Ints withheld by your employer from (b)(7) and (b) all required In Line 52. That justify additional expenses for and the resulting expenses in lines expenses and enter the total in eses expenses and you must such expenses necessary and	\$ \$	N.A. N.A.
53 54 55 56	Tota Sup disa nonl Qua wag repa Tota Ded whice a-c l Line prov	Part V. DETERMINAT al current monthly income. Enter port income. Enter the monthly aviolating payments for a dependent chiliponkruptcy law, to the extent reason diffied retirement deductions. Enter es as contributions for qualified retirements of loans from retirement plantal of all deductions allowed under suction for special circumstances. In there is no reasonable alternative pelow. If necessary, list additional experiences are detailed explanation of the sonable.	Enter the total of Lines 38, 46, and 25 TION OF DISPOSABLE INC the amount from Line 20. The reage of any child support payment and the reported in Part I, that you receive the about the monthly total of (a) all amount are ment plans, as specified in § 5410 ans, as specified in § 362(b)(19). § 707(b)(2). Enter the amount from the special circumstances that the special circumstances that the special circumstances that make special circumsta	ts, foster care payments, or yed in accordance with applicable such child. Ints withheld by your employer from (b)(7) and (b) all required In Line 52. That justify additional expenses for and the resulting expenses in lines expenses and enter the total in eses expenses and you must such expenses necessary and Amount of expense	\$ \$	N.A. N.A.
53 54 55 56	Tota Sup disa nonl Qua wag repa Tota Ded whice a-c l Line prov reas	Part V. DETERMINAT al current monthly income. Enter port income. Enter the monthly aviolating payments for a dependent chiliponkruptcy law, to the extent reason diffied retirement deductions. Enter es as contributions for qualified retirements of loans from retirement plantal of all deductions allowed under suction for special circumstances. In there is no reasonable alternative pelow. If necessary, list additional experiences are detailed explanation of the sonable.	Enter the total of Lines 38, 46, and 25 TION OF DISPOSABLE INC the amount from Line 20. The reage of any child support payment and the reported in Part I, that you receive the about the monthly total of (a) all amount are ment plans, as specified in § 5410 ans, as specified in § 362(b)(19). § 707(b)(2). Enter the amount from the special circumstances that the special circumstances that the special circumstances that make special circumsta	ts, foster care payments, or yed in accordance with applicable such child. Ints withheld by your employer from (b)(7) and (b) all required In Line 52. That justify additional expenses for and the resulting expenses in lines expenses and enter the total in eses expenses and you must such expenses necessary and Amount of expense \$	\$ \$	N.A. N.A.
53 54 55 56	Tota Sup disa nonl Qua wag repa Tota Ded whice a-c l Line prov reas a. b.	Part V. DETERMINAT al current monthly income. Enter port income. Enter the monthly aviolating payments for a dependent chiliponkruptcy law, to the extent reason diffied retirement deductions. Enter es as contributions for qualified retirements of loans from retirement plantal of all deductions allowed under suction for special circumstances. In there is no reasonable alternative pelow. If necessary, list additional experiences are detailed explanation of the sonable.	Enter the total of Lines 38, 46, and 25 TION OF DISPOSABLE INC the amount from Line 20. The reage of any child support payment and the reported in Part I, that you receive the about the monthly total of (a) all amount are ment plans, as specified in § 5410 ans, as specified in § 362(b)(19). § 707(b)(2). Enter the amount from the special circumstances that the special circumstances that the special circumstances that make special circumsta	ts, foster care payments, or yed in accordance with applicable such child. Ints withheld by your employer from (b)(7) and (b) all required In Line 52. That justify additional expenses for and the resulting expenses in lines expenses and enter the total in eses expenses and you must such expenses necessary and Amount of expense \$	\$ \$	N.A. N.A.

8

58	Total	adjustments to determine disposable income. Add sult.	the amounts on Lines 54, 55,	56 and 57 and enter	\$ N.A.
59	Mont	hly Disposable Income Under § 1325(b)(2). Subtra	act Line 58 from Line 53 and	enter the result.	\$ N.A.
		Part VI: ADDITIONA	AL EXPENSE CLAIMS	S	
60	and w under	Expenses. List and describe any monthly expenses, elfare of you and your family and that you contend sl § 707(b)(2)(A)(ii)(I). If necessary, list additional soully expense for each item. Total the expenses. Expense Description Total: Add L	hould be an additional deducti	ion from your current	monthly income
		Part VII: VE	ERIFICATION		
61	both a	are under penalty of perjury that the information providebtors must sign.) Date: 11/15/2012 Signature:	/-/ D 14 D 1	and correct. (If this a j	oint case,

Income Month 1			Income Month 2		
Gross wages, salary, tips	2,087.00	0.00	Gross wages, salary, tips	2,444.00	0.
Income from business	0.00	0.00	Income from business	0.00	0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0
Unemployment	0.00	0.00	Unemployment	0.00	0
Other Income	0.00	0.00	Other Income	0.00	0
Income Month 3			Income Month 4		
Gross wages, salary, tips	3,607.00	0.00	Gross wages, salary, tips	2,656.00	0
Income from business	0.00	0.00	Income from business	0.00	0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0
Unemployment	0.00	0.00	Unemployment	0.00	0
Other Income	0.00	0.00	Other Income	0.00	0
Income Month 5			Income Month 6		
Gross wages, salary, tips	2,926.00	0.00	Gross wages, salary, tips	2,687.00	0
Income from business	0.00	0.00	Income from business	0.00	0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0
Unemployment	0.00	0.00	Unemployment	0.00	0
Other Income	0.00	0.00	Other Income	0.00	0

Additional Items as Designated, if any

Remarks